

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	IF NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		
O.I.P.E. CLASSIFIER			12-30-01
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	6/30/02
2	✓	✓	6/30/02
3	✓	✓	6/30/02
4	✓	✓	6/30/02
5	✓	✓	6/30/02
6	✓	✓	6/30/02
7	✓	✓	6/30/02
8	✓	✓	6/30/02
9	✓	✓	6/30/02
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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